

Dr. John M. Leventhal's Testimony before the Appropriations Committee, March 4, 2011

I appreciate the opportunity to speak at this hearing. I am John M. Leventhal, a pediatrician at Yale-New Haven Children's Hospital and Professor of Pediatrics at Yale Medical School. My main activity at the hospital is as Medical Director of the Child Abuse Programs. In this capacity, I evaluate and treat children with suspected abuse and neglect and know first-hand the devastating effects of child maltreatment on children and families. I have seen the life-threatening injuries and even deaths from child maltreatment, the profound effects on children's development, the major disruptions to families, and the enormous costs to families and society. These abusive injuries and their consequences can be prevented with effective prevention programs.

I also know about prevention, since I am the Medical Director of a Nurturing Families home visiting site at the Hospital. The Children's Trust Fund and DSS have made impressive strides to establish home visiting programs in 42 sites around the state. These programs have resulted in remarkably low rates of referrals to DCF (2-4% per year), especially given the very high-risk nature of the families served. These rates are substantially lower than the rates in similar populations without these preventive services.

I would like to make 3 key points about the proposed cuts of the home visiting programs – 5 in New Haven and 8 in Hartford.

1. In New Haven during this week because of the 7 existing home visiting programs, 400 to 450 socially high-risk, first-time parents received home visits to prevent abuse and neglect, promote positive parenting, and ensure the child's safety in the home, and these home visits can occur weekly from the prenatal period to the child's fifth birthday. With the economic downturn over the last 2½ years, there has been concern that child maltreatment will increase, and recent

studies show that case of serious abuse have increased by 50% in other regions of the country. In New Haven, however, where we have seen the same economic downturn, we have not seen this increase in cases of serious abuse, in part, I believe because of the preventive services in place with many of our high-risk families. It would be a tragedy if home visiting were removed from over 300 families per year, and the occurrence of abuse increased.

Second, \$12 million of federal funding are available to support home visiting services in Connecticut, but a critical requirement is for the state's level of funding for CTF to be at 95% of the 2010 state appropriation. If the legislative funding of the New Haven and Hartford sites is completely cut from the CTF budget, our state will be below this 95% mark and will lose this federal funding. This would be bad news for the state and even worse for our high-risk families.

Finally, it is important to note that cutting home visiting services in New Haven and Hartford affects the most vulnerable children in the state – newborns and young children whose families live in poverty, and whose parents are often teens or very isolated or with mental health problems or with problems of family violence. Do we really need to cut \$3.2 million from these critical services to balance the state's budget? Certainly, when reports to DCF increase, no one will be happy. As you know, the state's budget is not just about money; it is about values as well. Where are our values as citizens of this state? Where are our values when we consider cutting child abuse preventive services for our most vulnerable young children and families? I urge you to restore the funding to CTF and DSS. Thank you

John M. Leventhal, MD
Professor of Pediatrics
Yale School of Medicine
Medical Director
Child Abuse Programs
Yale-New Haven Children's Hospital